File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319



73.5 HARSH DESTURE 69

Fax: 515-281-4073		SUMMARY PAGE		ZUUY JAN 13 AM 9: 17
COMMITTEE NAME (Must be	e same as on Statement of Orga	anization)		
Steven Fuller for County S	upervisor			FORM
(1)Statewide/Legislative/Judge (4)County Central Committee (1)	of committee you are reporting for: Standing for Retention Cendidate (5) County Candidate (6) City Cendi ty PAC (9) City PAC (10) School	5 2)State PAC (3)State Party idate (7)School Board or Other Political Board or Other Political Subdivision PAC) (DR-2 (Rev. 07/2007) For Office Use Only Comm. # 17333
CANDIDATE COMMITTEES	ONLY:			Logged in
Candidate Name Steven Fuller		Political Party (if applicable) Republican		Scanned
Office Sought				Computer
Polk County Supervisor		District (if Senate or House)		Audited
Late reports are subject to possi Robert L Mad SIGNATURE OF PERSON FIL		S15-266-6825 TELEPHONE	, ,	38A.401(3), the candidate, for a
AM FILING A 1-19-09		REPORT FOR (1) ELECTION	/(2)NON	I-ELECTION YEAR.
	eport date)	Indicate by		
TCHECK IF AMENDMENT T	O REPORT DATED			mmittees, enter Date of Election
(You must continue to	ation) report and attach Notice of file reports until a DR-3 is filed	i.)		Local Committees, enter County in iction is held
STATEM	ENT OF CASH ON HAN)		
committee. This amo	ning of the reporting period. (To bunt MUST be the same as the d eriod or must be zero if this is fi		\$	872.60
ADD TOTAL MONEY	TAKEN IN THIS PERIOD			7.419.22
Schedule A: Cash C	ontributions total (Attach Sched	ule A) (*also see in-kind below)		7,418.22
	•	F)		0.00
Schedule H: Total S	ales of Campaign Property (Atta	ch Schedule H)		0.00
(Schedule I	l applies to Candidates' Com	mittees Only) SUB-TOTAL	\$	8,290.82
SUBTRACT TOTAL	MONEY SPENT THIS PERIOD)		0.00
Schedule B: Expend	itures total (Attach Schedule B)	(**aiso see debts and loans below)		0.00
Schedule F: Loan Re	epayments total (Attach Schedu	le F)	*********	8,290.82
CASH ON HAND at the end of	this reporting period (if final rep	ort balance must be zero)	\$	0.00
"UNPAID BILLS (From Scher	dule D - Attach Schedule D)		\$	0.00
'IN KIND CONTRIBUTIONS (From Schedule E - Attach Sche	dule E)	\$	0.00
"OUTSTANDING LOANS (Fr	om Schedule F - Attach Schedu	le F)	\$	
CONSULTANT BREAKDOW!	(Schedule G Attached?)		_	YESNO
CANDIDATE COMMITTEES (DNLY:			0.00
VALUE OF CAMPAIGN PRO	PERTY (From Schedule H - Atta	nch Schedule H)	\$	0.00

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form CONTRIBUTIONS -- MONEY TAKEN IN (Including candidate's personal funds) COMMITTEE NAME (Must be same as on Statement of Organization) Steven Fuller for County Supervisor

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

					44
DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE	AMOUNT RECEIVED	√ IF FOR FUND-
(IVIIVI/DD/TR)	NUMBER		(if applicable)		RAISER INCOME
	ID#	Steven Fuller conversion of loan to contribution		\$7418.22	
11/11/08	CK#		candidate	Ψ/410.22	
	ID#				
:	ск#				L
	ID#				
	CK#				
	ID#				
	Ск#				
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	ID#				
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	ID#				
	CK#				
	1	<u> </u>	SUB-TOTAL	\$ 7418.22	
		TOTAL (if last page	of this schedule)	\$ 7418.22	
					•

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and effinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)

			E LEIA S	SCHEDULE	1
MITTEE NAM	(Must be same as on Statement of Organizati	on)		(Boy 02/08)	LOANS
ve Fuller for (ounty Supervisor			(Rev. 02/08)	& REPAIL
	e reports money loaned to the committee which	•	ttee account.		THIS BOX NG FORM
TI - MONETA (Original :	RY LOANS RECEIVED <u>THIS</u> REPORTING PE ource of loan, such as a bank, must be shown	RIOD if a third party is involved.	include loans from cand	didate's personal i	funds.)
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LE (Include Endorser's Name, If Ap		RELATIONSHIP TO INDIDATE (If Applicabl	e*)	OF LOAN
				\$	
•					
		то	TAL (PART I)	\$	
(Loans)	ARY LOAN REPAYMENTS MADE <u>THIS</u> REF orgiven must be reported on Schedule E — In- NAME AND ADDRESS OF LI (Include Endorser's Name, if Ag	ORTING PERIOD and Contributions.)	TAL (PART I) RELATIONSHIP TO ANDIDATE* (If Applicat	AMOUNT	REPAID
(Loans i	orgiven must be reported on Schedule E In-	ENDER applicable)	RELATIONSHIP TO	AMOUNT	
(Loans in DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LE (Include Endorser's Name, If Ar Steven Fuller 7473 NE 108 Pl	ENDER applicable)	RELATIONSHIP TO ANDIDATE* (If Applicat	AMOUNT	
(Loans in DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LE (Include Endorser's Name, If Ar Steven Fuller 7473 NE 108 Pl	ENDER applicable)	RELATIONSHIP TO ANDIDATE* (If Applicat	AMOUNT	
(Loans in DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LE (Include Endorser's Name, If Ar Steven Fuller 7473 NE 108 Pl	ENDER applicable)	RELATIONSHIP TO ANDIDATE* (If Applicat	AMOUNT	
(Loans in DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LE (Include Endorser's Name, If Ar Steven Fuller 7473 NE 108 Pl	ENDER plicable) C/	RELATIONSHIP TO ANDIDATE* (If Applicate Candidate)	e \$8290).82
(Loans in DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LE (Include Endorser's Name, If A) Steven Fuller 7473 NE 108 PI 1A 50035-1022	PORTING PERIOD (ind Contributions.) ENDER (phicable) C./ _, Bondurant, (RELATIONSHIP TO ANDIDATE* (If Applicate Candidate) Candidate MENTS (PART II)	* 8290.82).82
(Loans in DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LE (Include Endorser's Name, If Ag Steven Fuller 7473 NE 108 PI IA 50035-1022	ENDER plicable) C/	RELATIONSHIP TO ANDIDATE* (If Applicate Candidate) MENTS (PART II) NS FORGIVEN	e \$8290).82